Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							ſ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			9 minus 20=		• /			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			Ç mir	nus 3 =	* 3			X40=		OR	X80=	240	
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=	270		
* If the difference in column 1 is less than zero, enter "0" in column 2							1	TOTAL		OR	TOTAL	1220	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY OF			OTHER THAN R SMALL ENTITY			
AMENDMENT A	P	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. \\	Minus	<del>-0</del> 4	$\mathcal{D}_{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline$	=		X\$ 9=		OR	X\$18=		
	Independent	· 7	Minus	*** (	<u>e</u>	= (		X40=		OR	X80 <u>=</u> €	810	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDEN	CLAIM			+135=		OR	+270=		
							L	TOTAL ADDIT. FEE			TOTAL ADDIT, FEE	R	
		(Column 1)		(Colu		(Column 3)		19011.1 EE			7,5511.1 221		
ENT B	£ 1	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
<b>AMENDMENT</b>	Total	· /2	Minus	** \( \hat{\alpha} \)	<u>(C)</u>	=	$\  \ $	X\$ 9=		OR	X\$18=		
	Independent	TATION OF ME	Minus	***	CLAIM	= /		X40=		OR	X80=	16	
<u> </u>	TINGT FRESE	NIATION OF IME	DETIFEE DEF	LINDLINI	CLAIM		י [	+135=		OR	+270=		
			•				A	TOTAL DDIT. FEE	1	OR	TOTAL ADDIT. FEE	16	
		(Column 1)	,	(Colur		(Column 3)							
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	. 16	Minus	" L	0	= 0		X\$ 9=		OR	X\$18=	0	
<b>AMENDMENT</b>	Independent	. 8	Minus	***	7	= /		X40=		OR	X80=	86	
Ĺ	FIRST PRESE	NTATION OF MI	JLTIPLE DEP	ENDENT	CLAIM		╹┞	+135=	+		+270=		
		mn 1 is less than th					L	TOTAL	<del>/</del>	OR	TOTAL	97	
***	If the "Highest Nu	mber Previously Pa mber Previously Pa nber Previously Pai	aid For" IN THIS	S SPACE i	is less tha	n 3, enter "3."	^	DDIT. FEE L	ropriate box		ADDIT. FEE	10	